

CITY OF BALTIMORE
DEPARTMENT OF PLANNING
COMMISSION FOR HISTORICAL AND ARCHITECTURAL PRESERVATION
417 East Fayette Street, 8th floor
Baltimore, Maryland 21202
Tel.: (410) 396-4866, FAX (410) 396-5662

**PROPERTY TAX CREDIT APPLICATION FOR HISTORIC
RESTORATIONS AND REHABILITATIONS**

PRELIMINARY REVIEW

Please read this application carefully. Completion of a preliminary review (pre-certification) is required **prior to start of project construction**; please refer to program brochure and CHAP Tax Credit Rules and Regulations for complete program requirements. Note: Commercial properties in designated State Enterprise Zones are not eligible for this program.

- | | |
|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. _____

Property Address ZIP | 2. _____
Property Reference #
(Ward/Section/Block/Lot) |
| 3. _____

Owner's Name and Address
(All correspondence will be sent to this address) | 4. _____
Phone <input type="checkbox"/> home <input type="checkbox"/> work <input type="checkbox"/> cell

Phone <input type="checkbox"/> home <input type="checkbox"/> work <input type="checkbox"/> cell

Email Address |

5. Your property must be listed as one of the following (please check):

- A Baltimore **City Landmark**
- Located in a **Baltimore City Historic District**
If "yes", please state the name of the district: _____
- A **National Register Historic Landmark**
- Located in a **National Register Historic District**
If "yes", please state the name of the district: _____

6. Will your property be in full compliance with the City building and housing code when your project is complete? Yes / No

7. What is the current full cash value (assessed value of land and improvement as listed in SDAT) of your property? \$ _____

8. Do you have early pictures, photographs, written documentation and/or research information about your property, or similar buildings in your area, or have you otherwise attempted to ascertain the accuracy?

9. Name of architect/designer, if any: _____

10. Please provide a summary of the proposed restoration work and attach plans and specifications of the materials to be used, as well as a photo documentation of the current, pre-rehab condition of your building(s) and/or site. (Post-rehab photos are required for final certification, after completion of your project). Feel free to use attached work sheet for a more specific, “before” and “after” description of your plans and work.

Project Summary

Please complete the following, in order for the City to analyze the effectiveness of the program:

a. Was your last State income tax report filed as a resident of Baltimore City? Yes / No

If "No", please indicate where_____

b. Has the availability of the credit in any way affected your decision about where you live? Yes / No

c. What is your household income?

Less than \$ 24,999_____ \$ 25,000-49,999_____ \$ 50,000-74,999_____
\$ 75,000-99,999_____ Over \$ 100,000_____

d. How did you find out about the Baltimore City historic tax credit program?

City Agency___ Commun. Assoc. ___ Media___ Realtor___ Other___

e. Are you applying for this credit as a homeowner, commercial property owner or developer?

f. In the past, did you rent or own your home?

g. What is the present use of this property?

Principal Residence___ Office___ Retail___ Rental (up to 4
Units) ___ Rental (5 or more units)___ Mixed Use___ Other___

*h. Is this property currently vacant (meaning it has a vacant property notice)? Yes / No

i. Will the use of this property be changed after the restoration/rehabilitation? If so, please explain:

j. Would you make the improvements without the availability of the historic property tax credit? Yes / No

k. Did the availability of the historic tax credit affect the timing and the amount of the improvements?

If "yes", please explain:

l. Are you using any other Local/State/Federal tax incentives or development subsidy programs? Yes / No

If "yes", please identify the program(s):

I declare under penalty of perjury, that this application, including any accompanying forms and statements, has been examined by me, and the information contained herein, to the best of my knowledge and belief, is true, correct and complete, and that I have a legal interest in this property.

Owner's signature

Application Date

Print owner's name

Check Date

Please note: A project review fee of \$50.00, to be made out to the Director of Finance, Baltimore City, is due upon submission of this application and includes the CHAP Notice-to-Proceed permit fee, required in CHAP designated historic districts.

Regulations for this program are subject to change; you may be asked to submit additional information or an amended application if needed.

State and Federal Tax Credit Programs:

The City of Baltimore encourages property owners to also apply for State and Federal rehabilitation tax credit programs, whenever eligible. Applicants must follow the requirements of the Maryland Historical Trust to receive such credits – approval of a Baltimore City Rehabilitation Tax Credit project by CHAP does not guarantee approval by the MHT. Please contact the Maryland Historical Trust (MHT) at (410) 514-7626 for further information. We recommend that you contact both the MHT and CHAP whenever you begin to plan a tax credit rehabilitation project in Baltimore City.

FINAL REVIEW (CERTIFICATION)

Final certification requirements include a **site inspection** that should verify the completion of the proposed work, and compliance with all other requirements, as outlined in the historic tax credit legislation/rules and regulations documentation. After your project is completed, please submit **cost and photo documentation** of your project, as well as a copy of your **building permit(s)**, to the

Department of Planning / CHAP
C/o Ms. Stacy Montgomery, Program Manager
417 East Fayette Street – 8th floor
Baltimore, Md. 21202

HISTORIC PROPERTY TAX CREDIT WORKSHEET*

Property Address_____

Property Owner_____

Architectural feature:

Approximate date of feature:

Description of feature and existing condition (refer to photo documentation):

Describe the proposed work:

* Photocopy this form as needed

FOR COMMERCIAL PROJECTS ONLY

CHAP APPROVAL AND DEPARTMENT OF FINANCE REVIEW IS REQUIRED FOR PROJECTS WITH ANTICIPATED CONSTRUCTION COSTS **GREATER THAN \$ 3.5 MILLION**. Please submit a copy of this application to the Baltimore City Department of Finance, City Hall, 100 N. Holliday Street, Baltimore, Md. 21202, and Attn.: Mr. Pedro Aponte, for review.

1. Is your property eligible for the State Enterprise Zone property tax credit? YES_____ NO_____

If YES, you are not eligible for the historic property tax credit and must use the Enterprise Zone credit program.

If NO, you must submit a completed "Enterprise Zone Tax Credit Verification" form (attached) and a "Statement of Projected Economic Impact and Public Benefit" (available from the Finance Department).

2. Has your property been at least 75% vacant for at least the past three consecutive years? YES_____ NO_____

If YES, complete the "Affidavit of Vacancy Status" form (available from the Finance Department). If NO, you must demonstrate to the Director of Finance that this credit is necessary in order for the project to proceed.

3. At the time your project is completed, and before final CHAP certification, a notarized statement of your project construction costs, complete with supporting documentation, must be filed with CHAP.

Note: Three years from the date of application, a statement of the actual economic impact and public benefits derived from the project, must be submitted to the Finance Department.

I declare under the penalty of perjury, that this application (including any accompanying forms and statements) has been examined by me, and the information contained herein, to the best of my knowledge and belief, is true, correct and complete, and that I have a legal interest in this property.

Applicant's signature

Date

Print

Enterprise Zone Tax Credit Verification
Historic Restorations and Rehabilitation- Property Tax Credit
Program

The Baltimore City Historic Restoration and Rehabilitation Tax Credit Program requires use of the State Enterprise Tax Credit program for eligible projects. This form is intended to certify eligibility for the State Enterprise Zone Tax Credit program. Please have the form completed by the Enterprise Zone Administrator at the Baltimore Development Corporation. After filing out the required information about your property below, you may deliver or fax a copy of this form to the following location.

Elizabeth Weiblen Hines
Enterprise Zone Administrator
Baltimore Development Corporation
Suite 1600, 36 South Charles Street
Baltimore, MD 21202
(410) 779-3838
Fax: (410) 837-6363

Note: A completed form may be faxed to the Commission for Historical and Architectural Preservation (CHAP) at (410) 396-5662 or delivered to the following address:

CHAP attn: Stacy Montgomery
417 East Fayette Street, 8th Floor
Baltimore, MD 21201

The property located at _____
(Street and Number)

_____ and _____
(Block Number) (Lot Number)

Is _____ is not _____ located in a State designated enterprise/ empowerment zone area
(circle correct answer)

and is _____ is not _____ eligible for the enterprise zone property tax credit.
(circle correct answer)

Signature of _____, Date _____
Elizabeth Weiblen Hines, Zone Administrator